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any rate. It is probably impossible to fix upon any act so vicious and eccentric that, taken by itself, it could prove insanity, unless it be an involuntary result of neural disease. He must not build theories from above downward, like the architects of Laputa. Medical experts have little weight with juries, and the author would not submit questions of sanity to experts, nor distinguish very sharply between mental, moral or legal insanity. Goethe was right that nothing brings us nearer to insanity than distinguishing ourselves above others, and nothing keeps us sane better than general intercourse with many and often common people. Monomanias, moral and impulsive forms of insanity, which make most trouble in courts, are fullest treated.

*Psychiatrische Vorlesungen.* Von V. MAGNAN. Leipsic, Heft I., 1891; II., and III., 1892; IV., and V., 1893.

These between three and four hundred pages of the distinguished Belgian alienist contain all his more original papers, about twenty in number, and are translated into German by P. J. Möbius. Most were originally printed from students' notes. Professor Magnan, as is well known, has won his enviable reputation chiefly by his valuable work on the border-line phenomena and cases. It is impossible to do justice to these meaty papers in a brief notice. The best of them, to our thinking, are the lectures on chronic delirium with systematic evolution, which the German school prefer to call *paranoia completa*. His study of degenerate types has never been surpassed. Sexual aberrations, dipsomania, the childhood of criminals, morbid impulses to purchase things, gambling, onomatomania, intermittent phenomena, hallucinations of the right and left brain, heredity,—these are some of the special topics. The author is at his best in casuistic analysis, where, if he is not so minute as Kandinski, his penetration extends in more directions. Our own American Dr. Cowles, however, compares favorably with either of them, so far as he has published.

*Ueber die Bedeutung der psychiatrischen Unterrichts für Heilkunde.* Antrittsrede in Utrecht. DR. C. WINKLES. 1894, pp. 92.

The psychiatrist fights degeneration and to correct heredity. He must touch hands with the general practitioner on the one hand and with the spiritual office on the other. Degeneration on all hands, due to alcohol, opium, prostitution, anti-hygienic lives, abounds more and more. Every medical student must study psychiatry and hygiene. Doctors used to treat diseases as ontological entities, now they treat patients. They must learn to individualize; and their motto must be *minister non magister naturæ*. Not only persons but individuals are unique. Bertillon never failed to identify his man among 120,000 by the few small parts of the body he tested. Most individual is the nervous system. Psychiatry is no longer unskilled labor, but it has not yet attained due prominence in medical education. Defenses of it have been usually regarded as *oratio pro domo*. Science must not ride so high a horse that it cannot see the ground under it. Doctors have lectured at the sick bed on the anatomy of the brain, general psychology, pathology and even philosophy. Experts differ nowhere so much in court as on questions of sanity. Materialists and spiritualists as such are an anachronism. It was psychiatrists like Meynert, Forel, Gudden, Charcot and Flechsig who gave us the key to the architecture of the brain, and not the anatomists. The sick bed must not be neglected for the laboratory. The old divisions of diseases into